## S

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 OF 72 (check only one)    X
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NAME OF COMMITTEE (In Full) Visclosky for Congress		
Full Name (Last, First, Middle Initial)  Peoples Bank		Date of Disbursement
Mailing Address 9204 Columbia Avenue		06 16 2015
City State  Munster IN  Purpose of Disbursement Credit Card Payment  Candidate Name	Zip Code 46321-3517 Catego	Amount of Each Disbursement this Period 492.02  Transaction ID : D765045
Office Sought:  House Senate President  State:  Disbursement For Primary Other (s	Type r: 2016 General	
Full Name (Last, First, Middle Initial)  Marathon Oil  Mailing Address 9285 Wicker Avenue		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Saint John IN	Zip Code 46373	Amount of Each Disbursement this Period
Purpose of Disbursement Gas Reimbursement for Staff  Candidate Name  Office Sought: House Disbursement For	Catego Type	
Full Name (Last, First, Middle Initial)  Marriott Hotel		Date of Disbursement
Mailing Address 350 West Maryland Street		06 16 Y Y Y Y Y Y
City State Z	General	
SUBTOTAL of Disbursements This Page (optional)		492.02

TOTAL This Period (last page this line number only).....